



**REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

Docket Number (Optional)  
438P892

In re Application of Berejka et al.

**RECEIVED**

Application Number 09/891,549

Filed 6/26/2004

**FEB 25 2005**

For Radiation Curable Composition

**TC 1700**

Group Art Unit 1712

Examiner Michael J. Feely

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ 110.00
- ☐ Two months (37 CFR 1.17(a)(2)) \$ 400.00
- ☒ Three months (37 CFR 1.17(a)(3)) \$ 930.00
- ☐ Four months (37 CFR 1.17(a)(4)) \$ 1,440.00
- ☐ Five months (37 CFR 1.17(a)(5)) \$ 1,960.00

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 465.00.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0576.  
I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

2/11/03  
Date

02/20/2003 RMEBRANT 00000019 500576 09891549

01 FC:2253

465.00 OP

Signature

George R. McGuire

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.